## Active observation versus interval appendicectomy following successful non-operative treatment of appendix mass in children: a randomised controlled evaluation

Nigel J Hall et al, 2016

Table A1: Centres	principal	investigato	rs and	numbers	recruited
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Centre	Principal	Total number	Allocated	Allocated
Alden Hey Childrens Hearitel	Investigator(s)*			0 AU
Liverpool, UK	Harnet Corbett	15	/	0
Birmingham Children's Hospital,	Ingo Jester,	14	6	8
UK	Girish Jawaheer			
Southampton Children's Hospital,	Michael Stanton	11	5	6
Southampton, UK				
Evelina Children's Hospital,	Masih Kader,	9	5	4
London, UK	Alireza Keshtgar			
Karolinska Institutet, Stockholm,	Jan F Svensson	9	5	4
Sweden				
Queens Medical Centre,	Brian Davies	7	4	3
Nottingham, UK				
Leeds General Infirmary, Leeds,	Emma Sidebotham	5	2	3
UK				
Royal Belfast Hospital for Sick	David Marshall,	5	3	2
Children, Belfast, UK	Irene Milliken			
Royal Hospital for Sick Children,	Merril McHoney	4	2	2
Edinburgh, UK				
Chelsea and Westminster Hospital,	Simon Clarke	4	2	2
London, UK				
Norfolk and Norwich University	Thomas Tsang	4	2	2
Hospital, Norwich, UK				
Great Ormond Street Hospital,	Agostino Pierro,	3	1	2
London, UK	Paolo de Coppi			
John Radcliffe Hospital, Oxford,	Hugh Grant	3	2	1
UK				
Starship Hospital, Auckland, New	James Hamill	3	1	2
Zealand				
Royal Victoria Infirmary,	Bruce Jaffray	3	2	1
Newcastle, UK				
King's College Hospital, London,	Niyi Ade-Ajayi	3	1	2
UK		-		
Royal Alexandra Children's	Varadarajan	2	1	1
Hospital, Brighton, UK	Kalidasan			
Leicester Royal Infirmary,	Haitham Dagash,	1	1	0
Leicester, UK)	Shawqui Nour			
Addenbrookes Hospital,	Stephen Farrell	1	0	1
Cambridge, UK				
Koyal London Hospital, London,	Ashwini Joshi	0	0	0
UK				
Hull Royal Infirmary, Kingston-	Sanja Besarovic	0	0	0
upon-Hull, UK	1		1	

\* where more than one principal investigator listed then PI changed during study period

	IA group (n=45)	AO group (n=55)
Demographics		
Age (years, median [IQR])	9 [5-12]	8 [4-11]
Male gender (n[%])	21 [47%]	28 [51%]
Presence of faecolith on imaging at initial presentation with appendix mass (n [%])	11 [24%]	12 [22%]

## Table A2: Baseline characteristics of treatment groups for comparison based on treatment actually received

## Table A3 Comparative outcomes between treatment groups based on treatment actually received

Comparative outcomes			
Total length of stay (hours)	32 [27-48]	0 [0-17]	<0.0001\$
Cost (UK £)	1482 [1149-2138]	0 [0-400]	< 0.0001\$
<sup>§</sup> Mann-Whitney test			

Table A4: Results of multiple linear regression analysis exploring relationship between treatment group and outcomes adjusting for minimisation factors (PTR analysis). Effect sizes are multiplicative compared with reference as regression analysis was performed on log-transformed data.

	Adjusted effect size (95%CI)	Р
Total hospital stay in 1 year follow-up (hours)		
Gender		
Female	reference	
Male	1.23 (0.67, 2.26)	0.49
Presence of faecolith		
No Faecolith	Reference	
Faecolith	2.28 (1.02, 5.09)	0.05
Age		
Age (per year older)	0.94 (0.86, 1.04)	0.23
Treatment group		
IA	reference	
AO	0.09 (0.05, 0.15)	< 0.001
Cost in 1 year of follow-up $(UK \pounds)$		
Gender		
Female	reference	
Male	1.65 (0.57, 4.72)	0.35
Presence of faecolith		
No faecolith	reference	
Faecolith	4.23 (1.04, 17.17)	0.04
Age		
Age (per year older)	0.87 (0.74, 1.04)	0.12
Treatment group		
IA	reference	
AO	0.00(0.00, 0.01)	< 0.001

Figure A1: Incidence and timing of histologically proven recurrent appendicitis during 1 year follow-up (panel A) by presence of a faecolith (panel B) and gender (panel C) in children allocated to active observation (ITT analysis). Curves compared using log-rank test.



Figure A2: Incidence and timing of appendicectomy (any cause) during 1 year follow-up (panel A) by presence of a faecolith (panel B) and gender (panel C) in children allocated to active observation (ITT analysis). Curves compared by log-rank test

